

CRIMINAL REPORT AFFIDAVIT / NOTICE TO APPEAR

1768851

GRID # 3222

COURT CASE/
J.F. ID #

SAO #

OBS #

AGENCY REPORT #

13-037294

AGENCY NAME

HCSO

ORI #

FL0290000

LOCATION OF
OFFENSE

16580 NORTHDAL OAKS DR

DATE OF
OFFENSE

01/18/13

TIME OF
OFFENSE

2207

WITHIN:

TAMPA, FL 33624

TAMPA ☐ PLANT CITY ☐ TEMPLE TERRACE ☐ UNINCORPORATED AREA ☒

SUPPLEMENTAL CRA ATTACHED ☐

COURT:

TAMPA COURT ☒ PLANT CITY CT ☐

LOCATION OF
ARREST

16580 NORTHDAL OAKS DR

DATE OF
ARREST

01/18/13

TIME OF
ARREST

2258

BOOKING #

SOID #

WEAPON
TYPE

NONE

WEAPON
SEIZED

Yes ☐ No ☒

ARREST

- ☒ Probable Cause ☒ Adult
☐ Capias ☐ Juvenile
☐ Fugitive Warrant ☐ Delinquency
☐ VOP/VOC ☐ Dependency
☐ Warrant ☐ Felony
☐ Juvenile Pickup ☐ Misdemeanor
☐ Traffic MISD
☐ Traffic FEL
☐ Direct File/SAO ☐ Ordinance
☐ Review ☐ Pickup
☐ Summons ☐ Other
☐ Juvenile Pickup

REQUEST FOR:

- ☐ Direct File/SAO
☐ Review
☐ Warrant
☐ Summons
☐ Juvenile Pickup

NOTICE TO APPEAR:

- ☐ Arresting officer
☐ Booking supervising officer

NAME

SHEETS, KORY

G

ALIAS

N/A

RACE:

W-White I-American Indian/Alaskan Native HW-Hispanic White MB-Hispanic Black B-Black O-Oriental/Asian

Race

B

SEX

M

D.O.B.

03/31/85

MO

DAY

YEAR

APPROXIMATE AGE

21

COMPLEXION

DKS

HEIGHT

5'

WEIGHT

195

COLOR: EYES

BRO

HAIR

BLK

LOCAL ADDRESS (Street, Apt. #, City, State, Zip)

16580 NORTHDAL OAKS DR

Ph #

860-205-2297

Permanent Address (Street, Apt. #, City, State, Zip)

TAMPA, FL 33624

Ph #

Business Address (Street, Apt. #, City, State, Zip)

Ph #

Driver's License

No.

3320507851110

State

FL

State

CT

PLACE OF
BIRTH

CT

DOC #

Gang Member: Yes ☐ No ☒

Gang Name

N/A

SCARS, MARKS, TATOOS,

UNIQUE FEATURES (Loc., Type, Desc.)

WINGS on UPPER BACK

IF JUVENILE:

School Name

Mother/Guardian

Address

Ph #

Father/Guardian

Address

Ph #

Released To:

JAC ☐

Parent ☐

Guardian ☐

Other Relationship ☐

Other ☐

Co-Defendant (Last, First, Middle)

N/A

Sex:

Race:

DOB

Arrested ☐

At Large ☐

Capias/Warrant Requested ☐

Felony ☐

Misdemeanor ☐

Juvenile ☐

Co-Defendant (Last, First, Middle)

Sex:

Race:

DOB

Arrested ☐

At Large ☐

Capias/Warrant Requested ☐

Felony ☐

Misdemeanor ☐

Juvenile ☐

STATUTE (subsec.) / ORD #	DV	CP	CHARGE STATUS	BOND SET	CHARGE	TRAFFIC CITATION #	DRUG ACT/TYPE
784.03(1)(a)1	Y	N	M		DV-SIMPLE BATTERY		

CHARGE STATUS: F-Felony M-Misdemeanor T-Traffic O-Ordinance FT-Felony Traffic DV-Domestic Violence CP-Child Present

ACTIVITY: N-N/A P-Possess S-Sell B-Buy T-Traffic R-Smuggle D-Deliver E-Use K-Dispense/Distribute M-Manufacture/Produce/Cultivate Z-Other

Type: N-N/A A-Amphetamine B-Barbiturate C-Cocaine E-Heroin H-Hallucinogen M-Marijuana O-Opium/Deriv. P-Paraphernalia/Equipment S-Synthetic U-Unknown Z-Other

A LIST OF TANGIBLE EVIDENCE (If none, write "None") (Evidence List must be provided for all NOTICES TO APPEAR)

DESCRIPTION/AMOUNT PER UNIT	RECOVERED BY	GIVEN TO	PRESENT LOCATION
PHOTOS	RIVERS	VERIPIC	VERIPIC

Mandatory Appearance in Court ☐

You need not appear in Court, but must comply with instructions on Reverse Side. ☐

COURT INFORMATION: You must appear in County Court at the:

COURTHOUSE TOWER ANNEX, 801 E. TWIGGS STREET ☐
(Corner of Jefferson & Twigg Street), TAMPA, FLORIDA 33602

COUNTY OFFICE BUILDING, MICHIGAN & REYNOLDS STREET ☐
PLANT CITY, FLORIDA 33566

Division

COURTROOM #

ON

, 20

, AT

a.m. ☐ p.m. ☐

I agree to appear at the time and place designated above to answer for the offense(s) charged or to pay the fine subscribed. I understand that if I willfully fail to appear before the Court as required by the Notice to Appear, I may be held in contempt of Court and a warrant for my arrest shall be issued. You may also be charged with the crime of Failure to Appear, F.S. 843.15. I certify that my address as listed above is correct and I further understand that I have a continuing duty to advise the Court of any changes in my address as set forth above.

Signature of Defendant/Juvenile

Parent or Guardian (If Juvenile)

White - Clerk of Court

Green - State Attorney

Canary - Arresting Agency

Pink - Central Booking/Detention Center

Goldenrod - Defendant

13-037294
AGENCY REPORT #

AGENCY NAME HCSO 1768851

State facts to establish probable cause that a crime was committed by the defendant or that the child is dependant ON 1/8/13, AT APPROX 2207 HRS AT 16540 NORTHDALL OAKS DR IN HILLSBOROUGH COUNTY, THE DEFENDANT AND VICTIM GOT INTO AN ARGUMENT ABOUT THEIR PHONES. THE VICTIM CALLED 911 AND TOLD THE DISPATCHER THAT THE DEFENDANT "NEEDS HELP." THE DEFENDANT ADMITTED THAT HE "GRABBED & THREW HER OUT OF HIS WAY" AS HE WAS LEAVING. DURING THE INVESTIGATION THE VICTIM WAS CRYING & UPSET, AND THE DEFENDANT GLARED AND GRINNED AT THE VICTIM CAUSING THE VICTIM TO BE MORE UPSET & RELUCTANT TO SPEAK WITH LAW ENFORCEMENT. AS THE VICTIM WAS TRYING TO LEAVE, I OBSERVED THE DEFENDANT AGGRESSIVELY APPROACH THE VICTIM. THE VICTIM WAS VISIBLY UPSET BY THIS AND TRIED TO GET AWAY FROM THE DEFENDANT. THE DEFENDANT CONTINUED TO FOLLOW THE VICTIM AS SHE WAS TELLING HIM TO LEAVE HER ALONE. I VERBALLY CONFIRMED BY DASH MV. I THEN DETAINED THE DEFENDANT AS I BELIEVED THERE WAS A PROPENSITY FOR FURTHER VIOLENCE.
Judgement requested against defendant for agency investigative cost per Florida Statute 938.27: \$

OFFICER

I.D. # _____ Dist. & Squad _____
(Please Print The Above Information)

SWORN TO AND SUBSCRIBED BEFORE ME THIS

18 DAY OF JANUARY, 2013
CPL. B. SCHMITZ SS93

NAME/Title of Person Authorized to Administer Oath

POLICE REPORT WRITTEN: Yes ☒ No ☐

OFFICER RIVERS I.D. # 220616 Dist. & Squad 01/103

I SWEAR THAT THE ABOVE STATEMENTS ARE CORRECT TO THE BEST OF MY KNOWLEDGE. FOR NOTICES TO APPEAR, I ALSO CERTIFY THAT A COMPLETE LIST OF WITNESSES AND EVIDENCE KNOWN TO ME IS ATTACHED.

AFFIRANT, Signature

AFFIRANT, Print/Type Name

C RIVERS

PROBABLE CAUSE STATEMENT

REPORT #

AGENCY NAME

TO BE FILLED IN BY

DATE